Type of Inspection New Annual M Follow-Up (Prev. Inspection Date) Complaint □ Courtesy Random

CPS Coordinates

NCDA&CS, VETERINARY DIVISION ANIMAL WELFARE SECTION 1030 MAIL SERVICE CENTER, **RALEIGH, NC 27699-1030** PHONE: 919/715-7111, FAX: 919/733-6431

INDOOR **OUTDOOR** \square вотн д



ANIMAL WELFARE INSPECTION

35.08955

OTS Coolumates - IV.
LICENSE #: <u>/ 0ん</u> 3 / TYPE FACILITY: Animal Shelter (Private/Public) ロ Boarding Kennel Pet Shop ロ Public Auction ロ
BUSINESS NAME: OAKRIDGE KENNES
OWNER:
ADDRESS: IND W. UNIONVILLE-IND MONROE TELEPHONE: (704)289-5828
VMO HUNTER
COUNTY ()NiON
Number of Primary Enclosures 54 Animals Present: Dogs Cats
Inspector: Mark "X" in each box, if adequate.

STRUCTURE

Housing Facilities

- ★1. Structure & Repair
- **≥**2. Ventilation & Temp.
- 3. Lighting

 ✓
- 4. Ceiling, Wall, Floors
- ≤ 5. Storage
- ¥6. Water Drainage

Primary Enclosures

- ₹7. Structure & Repair
- 8. Space
- ≥9. Ventilation & Temp.
- **₹**10. Adequate Shelter

SANITATION

★11. Waste Disposal

Use NA if not applicable

- **1**2. Odor
- 3. Ceiling, Wall, Floors
- ⊋ 14. Primary Enclosures
- ≤15. Equipment & Supplies
- ∡16. Washrooms, Sinks, Basins

Circle each item number, if inadequate.

- **₹**17. Insect/Vermin Control
- **18**. Building & Grounds

HUSBANDRY

- 19. Adequate Feed/Water
- □ 20. Food Storage
- 21. Personnel
- ₹22. Ratio of 1:10 personnel to animals if >4 in primary enclosure or common area
- □ 23. Animals' Appearance

SPECIAL ITEMS

Records

w. 80.56377

- **≥**24. Description of Animals
- ₹25. Records/Vet Treatment
- ₹26. Origin/Disposition
- 27. Signature (boarding kennel)
- Written permission from owner for commingling

(doggie daycare)

Transportation

29. Care in Transit Discussed

Veterinary Care

- ≥30. Isolation Facility
- №31. No Signs of Illness/

Treated

APPROVED

□ CONDITIONALLY, APPROVED □ DISAPPROVED

Owner/Authorized Agent's Signature

AW-2 Rev. 1/07

White= Office

Canary= Inspector

Pink= Owner

PAGE OF

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ANIMAL WELFARE INSPECTION CONTINUTATION PAGE

LICENSE #: TYPE FACILITY: Animal Shelter (Private/Public) Business Name: OAKDIDGE KENNELS OWNER:						
ADDRESS: TELEPHONE	Z: ()		CONT			
Item Number	and the second s	Explanation of	— f Inadequacy (circled it nmendation For Comp	ems above) And	Date Corrections	
(26)	OPEN E	PA6S OF MUST	DOG FOOL BE STOREX	NOTEL IN SEA	LED CONTAINER	
⅓ APPROVE	'D	DISAPPRØVED	Date: Anow	9 2008 Time:	0800	
	here	S Signature	me. ////	My Jo	uthorized Agent's Signature	
AW-2 Rev. 1/07	WI	nite= Office	Canary= Inspecto	-	nk= Owner	